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For destruction of mosquitoes by sulphur, 2 pounds of sulphur are usually used per 1,000 cubic feet. The market price of sulphur at 3 cents per pound would make the cost 6 cents per 1,000 cubic feet. In addition, in practical work on a large scale the expense and trouble of hauling the disinfecting equipment from one place to another would be much diminished.

A very natural objection may occur to many to the use of this agent in the manner herein described, on account of the distribution of such quantities of so active a poison as mercuric chloride. But I think the danger more apparent than real. When the room was opened in the above experiments it was filled with a thick mist of the sublimed mercuric chloride. The room was entered without any special precaution and the windows were opened. In a few minutes the sublimed mercuric chloride was carried away by the slight air currents prevailing, leaving a slight deposit on surfaces within the room. This was allowed to remain for 2 or 3 days, the room being used in the meantime without any untoward results. The deposit, however, can be readily removed with a damp cloth, and this should be done. With very ordinary care I can see no danger in the use of mercuric chloride in the manner above described.

In conclusion, I believe that while mercuric chloride can not altogether take the place of sulphur as an insectitude it has a sphere of usefulness hitherto unrecognized, especially with reference to flies and mosquitoes.

ON THE RELATION OF ROCKY MOUNTAIN SPOTTED FEVER TO THE TYPHUS FEVER OF MEXICO.—A PRELIMINARY NOTE.

By John F. Anderson, Director Hygienic Laboratory, and Joseph Goldberger, Passed Assistant Surgeon, United States Public Health and Marine-Hospital Service.

Several observers and writers have called attention to the close clinical resemblance of Rocky Mountain spotted fever to typhus. One of us having seen typhus fever in England, and later the spotted fever in Montana, was also struck by the clinical similarity of the two diseases.

Typhus fever being one of the quarantinable diseases under the regulations of the Treasury Department, it seemed desirable both on theoretical and practical grounds to take up the study of typhus fever in Mexico in order to determine whether the two diseases are really identical, particularly as the work of Ricketts had developed a basis for the identification of the Rocky Mountain disease. Ricketts has shown that Rocky Mountain spotted fever has a definite clinical course in certain animals, particularly guinea pigs and monkeys, in which it also produces characteristic anatomical lesions. He has shown that in the guinea pig, after intraperitoneal inoculation of blood of spotted fever, there appears in from 2 to 5 days a distinct rise in the temperature of the animal. The fever continues to rise for 2 or 3 days, after which it maintains itself at about the level which it has attained for 2 or 3 days longer. At the end of this time the animal either dies or the fever begins to subside. The objective signs of the infection are a roseolar eruption, with hemorrhage into and frequently gangrene of the external genitals. At necropsy the most striking features are a greatly enlarged spleen and swollen and hemorrhagic lymph nodes.

With these facts in mind, we took up the study of typhus as it presents itself in Mexico City. Our observations of the disease in the Hospital General bring out certain definite clinical differences between this disease and the Rocky Mountain fever. These differences we will discuss in a later paper.

Experimentally, in guinea pigs, the intraperitoneal injection of blood drawn from patients between the eighth and fifteenth day after the onset of typhus fever has failed to produce either the signs or symptoms above briefly described for Rocky Mountain spotted fever. We have made similar inoculations into monkeys, rabbits, and rats, the results of which we are not as yet in a position to present. In our opinion, however, the negative results in the guinea pig are conclusive evidence of the nonidentity of the two diseases.

For the laboratory and clinical facilities which we have enjoyed we are greatly indebted to many of our Mexican friends and colleagues, amongst whom, even in this brief note, we can not forbear to mention Drs. Eduardo Liceága, Octaviano Gonzalez-Fabella, Fernando Lopez, and Genaro Escalono.

UNITED STATES.

[Reports to the Surgeon-General, Public Health and Marine-Hospital Service.]

Plague-prevention work in California.

Surgeon Blue reports:

SAN FRANCISCO, CAL.

Last case of human plague: Sickened, January 30, 1908.
Last case of rodent plague: Trapped, October 23, 1908.

Week ended November 20.

Premises inspected	181
Houses destroyed	3
Buildings condemned	15
Nuisances abated	32
Poisons placed	8,850
Rats trapped	1,719
Rats identified:	
Mus norvegicus	1,261
Mus rattus	78
Mus musculus	338
Mus alexandrinus	42
Total	1,719
Rats examined bacteriologically	1,239
Rats found infected with *B. pestis*	0
Total number of rats found infected to date	398